									Application or Docket Number					
	PATENT A													
Effective October 1, 2000														
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLÁIMS										E	FEE		RATE	FEE
FOR			NUMBER FILED			NUMB	NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			minus 20=		*			X\$ 9=			OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =			*			X40=			OR	X80=	
MULTIPLE DEPENDENT CLAIM P				RESENT				+135=				OR	+270=	
* If the difference in column 1 is				less than zero, enter "0" in column 2					TOTAL		OR	<u> </u>		
CLAIMS AS AMENDED - PART II													OTHER	THAN
(Column 1)				(Colun			(Column 3)	nn 3) SMALL			ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT			HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATI		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minu	s	**		=		X\$ 9	=		OR	X\$18=	
	Independent	*	Minu		***		=]	X40:	=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							J	+135					
								l		- TAL		OR	TOTAL	
						_,	(0.1		ADDIT. F			OR	ADDIT. FEE	
		(Column 1) CLAIMS		V-9.43	(Colum		(Column 3)	<u> </u>		ADDI-	ŀ		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT			PREVI	MBER OUSLY FOR	PRESENT EXTRA		RAT	E	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minu	ıs	**		=	┧╽	X\$ 9	=		OR	X\$18=	
	Independent	*	Minu	1	***	T 01 4114	=	╽╽	X40	=		OR	X80=	
┞	FIRST PRESE	NTATION OF M	OLTIP	LE DEP	ENDEN	CLAIM		ן נ	+135	=		OR	+270=	
								Ĺ	TO [.] Addit. F			OR	TOTAL ADDIT. FEE	
		<u> </u>					7,0011.722	_						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	*/.3		NUN PREVI	HEST MBER IOUSLY) FOR	PRESENT EXTRA	$\Big] \Big[$	RATI	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Mint	ıs	**		=		X\$ 9	=		OR	X\$18=	
ME	Independent	*	Minu	1	***		=]	X40:			OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	LE DEF	PENDEN	T CLAIM		┧┟					 	 	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.														
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."														
	The "Highest Num								und in th	е ар	propriate bo	x in co	olumn 1.	